

09 / 888 677

PROSPECTOS (12-09)

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PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-975

Application or Docked Harbor

PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Docket Number

APPLICATION AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

FOR

NUMBER FILED

NUMBER EXTRA

RATE (\$)

FEES (\$)

RATE (\$)

FEES (\$)

BASIC FEE
(37 CFR 1.16(e), (f), or (g))

N/A

N/A

N/A

N/A

SEARCH FEE
(37 CFR 1.16(k), (l), or (m))

N/A

N/A

N/A

N/A

EXAMINATION FEE
(37 CFR 1.16(o), (p), or (q))

N/A

N/A

N/A

N/A

TOTAL CLAIMS
(37 CFR 1.16(n))

minus 20 =

=

X =

X =

INDEPENDENT CLAIMS
(37 CFR 1.16(n))

minus 3 =

=

X =

X =

APPLICATION SIZE
FEE
(37 CFR 1.16(e))

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(l))

TOTAL

TOTAL

* If the difference in column 1 is less than zero, enter "0" in column 2.

APPLICATION AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

AMENDMENT A
8-17-07

CLAIMS
REMAINING
AFTER
AMENDMENT

Minus

HIGHEST
NUMBER
PREVIOUSLY
PAID FOR

PRESENT
EXTRA

RATE (\$)

ADDI-
TIONAL
FEE (\$)

RATE (\$)

ADDI-
TIONAL
FEE (\$)

Total
(37 CFR 1.16(l))

47

Minus

55

0

X =

X =

Independent
(37 CFR 1.16(l))

16

Minus

16

0

X =

X =

Application Size Fee (37 CFR 1.16(e))

N/A

N/A

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(l))

TOTAL
ADDL FEE

TOTAL
ADDL FEE

AMENDMENT B
8-17-07

CLAIMS
REMAINING
AFTER
AMENDMENT

Minus

HIGHEST
NUMBER
PREVIOUSLY
PAID FOR

PRESENT
EXTRA

RATE (\$)

ADDI-
TIONAL
FEE (\$)

RATE (\$)

ADDI-
TIONAL
FEE (\$)

Total
(37 CFR 1.16(l))

0

Minus

0

0

X =

X =

Independent
(37 CFR 1.16(l))

0

Minus

0

0

X =

X =

Application Size Fee (37 CFR 1.16(e))

N/A

N/A

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(l))

TOTAL
ADDL FEE

TOTAL
ADDL FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

1. If the entry in column 1 is less than the entry in column 2, write 'U' in column 3.

• If the entry in column 1 is less than the entry in column 2, enter "1". If the entry in column 1 is greater than the entry in column 2, enter "2". If the entry in column 1 is less than or equal to the entry in column 2, enter "0".

If the Highest Number Previously Filled In Is Less Than 3, Enter 3.

If the Highest Number Previously Paid For in 1910 is _____.

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